

Strategy for Young Carers 2013 - 2017

1. Introduction

Purpose of document

The needs of young carers are not the responsibility of any one agency. They are the responsibility of all, with a key focus on working in a more integrated and holistic way to identify, assess and enable young carers to access support at a level appropriate to their needs and circumstances and to achieve their full potential.

This strategy provides an overview of the national context for young carers and looks at what has been happening at a local level in Bracknell Forest to support them. It identifies gaps in services and makes recommendations for ways in which these gaps can be addressed at a strategic level, and how partners can address needs within their own individual services and across service and agency boundaries.

The aims of the strategy are to:

- Recognise developments in recent years and the sound base on which future developments can be planned.
- Describe approaches which will lead to young carers being happy, confident, fulfilled young people ready to move into adulthood.

This strategy has been developed with our stakeholders including Bracknell Forest Youth Service, KIDS SE, Bracknell Forest Adult Social Care, Health and Housing, Bracknell and Ascot CCG, Bracknell Forest schools, young carers and their parents.

Council/Partnership vision

- Children and Young People's (C&YP) Partnership

The C&YP Partnership ('the Partnership') is a group that represents all the agencies and organisations who provide support to children, young people and families in Bracknell Forest. These include for example, the Council, Health Service organisations, the Police and Voluntary and Community sector organisations.

The aim of the Partnership is to:

...."enable all children, young people and families to lead healthy and fulfilled lives, to play an active role within their community and realise their aspirations and potential through the well-coordinated provision of support and services".

- Vision for children and young people

The Partnership's ambition for all C&YP in the Borough is to provide opportunities for them to maximise their potential and strive for excellence. We want our C&YP to do well in school, have high aspirations, to be happy and healthy and to grow up to become well adjusted adults, able to play an active and confident role within the community.

- C&YP Plan

The Plan identifies four priorities for all those working with children and young people in Bracknell Forest ('outcome priorities', OP). These relate to education, health, safeguarding and helping vulnerable groups. All apply to work with young carers.

- OP1 Raise levels of attainment and pupil progress across all phases of learning for all pupils
- OP2 Improve physical and emotional health and wellbeing from conception to birth and throughout life
- OP3 Safeguard and protect C&YP
- OP4 Improve outcomes for all C&YP, especially the more vulnerable groups

In addition six 'underpinning' priorities (UP) have been identified which will ensure the successful delivery of the outcomes in the plan. These are important as they cut across all partner activity and help to consider some of the issues that impact on life chances and positive outcomes for children, young people and families. All are applicable to some extent for work with young carers.

- UP5 Embed prevention and early intervention into the routine delivery of all services to children, young people and families
- UP6 Support C&YP through key transitions in their lives
- UP7 Close the gap between children from low income backgrounds and their peers
- UP8 Strengthen parents and families through effective family support and engagement
- UP9 Support C&YP to become active citizens within their communities
- UP10 Ensure good quality service provision through effective commissioning

What we know and have learnt

2. National context and issues

2.1 Definitions

'Young carers are children and young people under the age of 18 years who provide regular and ongoing care and/or emotional support to a family member who is physically or mentally ill, has a long term condition, is disabled or misuses substances.'

'A young carer becomes vulnerable when the level of care-giving and responsibility to the person in need of care becomes excessive or inappropriate for that child, risking impacting on his or her own emotional or physical well-being or educational achievement and life chances.'

'No care package should rely on a young person taking on an inappropriate caring role that may damage their health or put their education at risk.'

Determining 'excessive or inappropriate care' will vary according to a child's age, level and impact of caring. Care packages need to recognise child, parents and family strengths, based on good joint assessments involving the family and adult, child, health and family professionals.

2.2 Legislation

“Carers will be universally recognised and valued as being fundamental to strong families and stable communities. Support will be tailored to meet individuals’ needs, enabling carers to maintain a balance between their caring responsibilities and a life outside caring, while enabling the person they support to be a full and equal citizen.”

This is the vision held by the Government for transforming the lives and outcomes for carers and the people they care for. The vision was included in ‘Recognised, valued and supported: Next steps for the Carers Strategy 2010’.¹

There is a wealth of other government policy, initiatives, research findings and best practice guidance in relation to carers, much of which can be found on the Department of Health website.² This includes ‘Carers at the heart of 21st-century families and communities’ - the Government’s 10-year strategy (to 2018) for giving support to carers.³ Young carers’ issues and needs are addressed in Chapter 6.

Think Local, Act Personal (2011)⁴ highlights the integral part that support for carers and a whole family approach play in further development, in bringing together health, well-being and social care, councils and their partners who will need to:

- Deliver “whole family” services looking at supporting disabled and older people and their families across health and social care, in an integrated flexible way. This will help ensure that families are not pushed to breaking point meaning they can no longer provide support.
- Integrate health and social care commissioning, systems and resources to provide more accessible and joined-up multi disciplinary arrangements

The rights of young carers are expected to be strengthened in a forthcoming Children and Families Act. In October 2013 an amendment was made to the Bill which means that all young carers under the age of 18 will be entitled to an assessment of their support needs by local authorities. Local authorities will also be asked to assess young carers alongside the person they care for, so a “rounded package of support for the whole family” can be provided. Further recognition for young carers is also being included in the Care Bill currently being progressed through Parliament.

2.3 Summary of guidance, research and good practice

Good practice points to the following ways forward:

- The need to recognise that good and consistent family relationships matter, not family structure.
- Assessments should take into account of the whole family and use a whole family pathway.

1

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213804/dh_122_393.pdf

2 www.dh.gov.uk

3

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/136492/carers_at_the_heart_of_21_century_families.pdf

4 http://www.thinklocalactpersonal.org.uk/_library/Resources/Personalisation/TLAP/THINK_LOCAL_ACT_PERSONAL_5_4_11.pdf

- Support should be offered to the family as a whole, should recognise the different responsibilities of parents and child and include the needs of young carers.
- No care package should rely on a young person taking on an inappropriate or excessive caring role.
- Conversations should talk equally to adults and children.
- There is a need to recognise how young carers feel (for example fear, isolation, anger), normalise their existence and increase their resilience.

3. Local context and issues

3.1 The Children's Society⁵ work with Bracknell Forest Children and Young People's Partnership – 2011

The Children's Society made the following recommendations to the Partnership:

1. Services to young carers need to be joined up and coherent;
2. There needs to be good representation from all agencies on the steering group and it needs to strengthen its focus on whole family working;
3. Raising awareness of the needs of young carers and their families including identifying hard to engage families needs to be embedded in the young carers action plan and implemented and encouraging schools to identify a named lead for this work;
4. Develop a common understanding amongst BFC staff around the issues surrounding young carers and their families;
5. Encourage teaching staff to take part in joint working with other professionals;
6. The young carers steering group should engage with the Local Safeguarding Children and Adults Boards to strengthen joined up working and consider workforce development needs to do this safely and effectively;
7. Specifically target GP practices and health professionals;
8. Consider improving communication networks to ensure young carers and their families are aware of all services available for them to access.
9. In line with national practice, services to young people could benefit from being delivered via some mainstream services e.g. youth services, schools etc
10. Bracknell Forest Council (BFC) consider future outcomes for young carers when designing its forthcoming tender process particularly:-
 - How can a young carer's service be fully transparent and accountable to BFC? Ensure safeguarding processes, information sharing, workforce development are clearly addressed;
 - Additionally to ensure delivery reaches the most vulnerable to address Eligibility and referral processes, case load recording, monitoring e.g. progress of person, time limited interventions with measurable outcomes;
 - Adopt a whole family approach.

There has been progress in all these areas since 2011 but broadly the recommendations are still valid in 2013.

In addition The Children's Society offered "Messages to Bracknell Forest Council" from young carers and their parents:

1. Think about offering more activities to young carers;

⁵ www.childrengsociety.org.uk

2. Ensure that Education, Health and Children's and Adults Workforce are aware of the needs of young carers and their families and understand how to respond to them;
3. Talk to each other;
4. If you say you are going to do something, then do it;
5. Let professionals including teachers know that parents may not be 100% all of the time but we do still love our children and want to be involved;
6. Involve the whole family when making decisions;
7. Talk to each other and stop arguing over who should be helping us.

3.2 In Bracknell Forest

o Memorandum of Understanding

BFC directorates Adult Social Care, Housing and Health (ASCHH) and CYP&L signed a memorandum of understanding (MoU) in December 2011 to work together to best address the needs of young carers and their families. The MoU will be reviewed in December 2014. The MoU states that where a parent or another family member has care or welfare needs arising from physical or mental illness, substance misuse, or disability we will work together and with our partners in health and carers organisations to ensure that:

- there are no "wrong doors" and that young carers are identified, assessed and their families are supported in ways that prevent inappropriate caring and support parenting roles regardless of which service is contacted first;
- risks to independence, safety and welfare are responded to with a 'whole family approach';
- earlier, better integrated and effective responses to young carers and their families are available using "*whole family pathway*" approaches;
- children are protected from excessive or inappropriate caring roles; further inappropriate caring is prevented; transition to adulthood is supported; parents feel supported in their parenting role; and;
- no care or support package for a parent or sibling relies on excessive or inappropriate caring by a young carer to make it sustainable;
- young carers are helped to achieve their potential; and, to have the same access to education, career choices and broader opportunities as their peers; and,
- there is better recognition and greater participation of young carers and their families in shaping what we do and in the development and delivery of responses that promote greater choice and control and prevent further inappropriate caring.

It is essential, where services are working with families that we should ensure that the needs of dependent children in the family, including those who may be assisting with caring, are recognised. This means taking account of their hopes, aspirations, strengths and achievements and the need for advice and support for all the family.

Central issues are recognition, identification, adverse impact and support.

There has been progress with ensuring compliance with the MoU but there is scope for further work in these areas.

○ **Schools' interest and involvement**

Schools have a key role in the identification of young carers, hopefully at an early stage. Their involvement and understanding is significant as there are implications for achievement, attendance, behaviour, well-being, the scope for out of school activities and involvement post-16 in education, employment and training. It is ideal if schools have a trained member of staff with lead responsibility for young carers.

In some schools there is this understanding and involvement, but there is scope for this situation to become the norm in all schools.

○ **'Young carers' and transition to 'carer'**

Young people become young adults at an age that varies from individual to individual. During this period their involvement in education, work, social and recreational activities will change. Their involvement and role as a 'carer' may also change over this time. There are differences in the way services are provided between adult and children's services, however adult services do have a range of preventative services as well as support for carers to reduce the impact on their caring role. It is important that the services that support young people, co-ordinated by CYP&L until the age of 18, and ASCHH over this age, are able to provide a continuity of support over this period and help the young person/adult make the right choices for them as individuals, knowing fully the information and options available to them.

○ **Adult Carers' Strategy**

The Council's ASCHH have a Joint Commissioning Strategy for Supporting Adult Unpaid/Informal Carers, 'Caring about Carers 2012-2015'. When someone is approaching adulthood and in early adulthood, life can change significantly with new responsibilities, roles and relationships. Support systems also change. A strategic priority in the Carers Strategy is to "support more, younger carers to come forward, working in partnership with Children and Young People Services". The strategy has four priorities:

- Enhancing quality of life
- Delaying and reducing the need for care and support
- Positive experience of care and support
- Protection from avoidable harm.

4. Local data and needs analysis

4.1 Data analysis

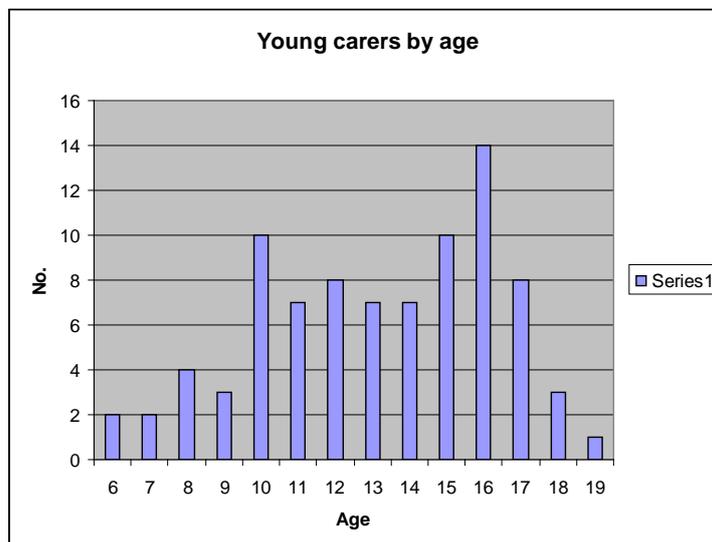
2011 Census tells us there were 592 people providing unpaid care up to 24 years of age. There are estimated to be between 300 and 500 young carers up to the age of 18 in the Borough.

The current provider of services, KIDS, provides support to young carers in two ways:

- in schools through drop in, assemblies or PHSE – 74 young carers are seen (July 2013).
- through its regular club sessions – 88 young carers are seen (July 2013) .

62% of young carers known to the current service (in school contacts and attending club sessions) are female.

The majority of young carers are between the ages of 10 and 17. This distribution is to be expected. Some young people undertake some caring responsibilities from young ages – 11 children aged under 10 are in contact with KIDS, who provide appropriate support to them.



11 of the 88 young carers participating in club sessions have a known disability.

88% of the 88 young carers participating in the club sessions are White British which is slightly higher than what might be expected. 7% are mixed race, broadly in line with expectations. The other 5% are split between the other ethnic groups, with numbers too small to draw any conclusions.

4.2 Needs analysis based on engagement, consultation, interviews

As a result of survey and consultation work with young carers and their parents, the following needs were identified:

- It is important that young carers' needs and those of all children in the family are considered together.
- Build relationships based on re-assurance, consistency and trust.
- To work with support staff who have the right attitude to children and young people, are 'nice, jolly and happy'.
- To be able to be and act like a child and not be judged.
- A whole family approach is essential.
- Support is best provided as a mixture of participation in mainstream activities, alongside other young carers who understand our issues and 1:1 support.
- Work with schools.
- To know young carers have someone to turn to, to have friends who understand.
- To have the opportunity to do the things that other young people do.
- To be able to focus at school.
- Support in school to be available, and meetings to include family members so that everyone understands all the issues.
- To have something to look forward to, get a break / rest.

- To have provided not just information but guidance too.
- To have help with social and emotional difficulties.
- To be talked to, listened to.
- When changes are made explain the reasons behind them.
- If there is a charge for sessions, consider financial support.
- Consider safe and appropriate transport to and from sessions.

Two short case studies are attached as Annex 1.

4.3 Key messages from data and needs analysis: Strengths, challenges and gaps

Joined up working can be enhanced, in particular:

- a need for greater shared understanding of issues by all agencies;
- through the use of whole family assessments so that the needs of young carers, other children in the family and adults are considered together;
- that pathways and support options are known about and accepted by all agencies so that the idea of 'no wrong doors' becomes a reality.

There are needs for practical support where necessary, for example with transport and financial support to access activities.

There is a need for greater involvement of, and awareness in, schools.

Attitudes and relationships are important.

Young carers and their families need to know of all services that are available and to be able to access these at a level they find appropriate.

There are benefits in joining in with mainstream activities, services and guidance as available to all young people.

5. Analysis of current provision/services

5.1 Mapping of current provision

The majority of services are provided (since October 2011) under contract by KIDS South East. Services include distributing information, providing a support contact point, providing regular club sessions and providing specific activities, for example activity days, weekend breaks and holidays. KIDS also maintain contact with a variety of partners to promote services, improve processes and influence policy.

Additional contracted projects-based arts services are provided by South Hill Park, for example in the 'Arts Plus Me' and radio projects.

Agencies involved in working with young carers are:

In BFC:

- Youth Service, which manages the contract for services and co-ordinates contact with young carers, aligning work with other service priorities.

- Children's Social Care
- Referral and assessment processes
- ASCHH
- Support provided to Family Support Advisers in schools

Bracknell and Ascot Clinical Commissioning Group (CCG)

Bracknell Forest schools

In July 2013 a Management Committee met for the first time to inform, advise and guide work related to the provision of services to young carers in the Bracknell Forest area. Representatives of all key services sit on the Committee. The terms of reference are attached as Annex 2.

5.2 Assessment of use, take up, occupancy, vacancies

The ambition is for all those young people with caring responsibilities to know of services that are available to support them, and to access these at a level they find appropriate. There is a continuum of support - for some young carers this will be knowing information, and they may attend mainstream services for young people, for others knowing that there is a contact point should they need specific support and for others more regular support through attending local club sessions.

Balanced against this is the capacity limitations of the contracted service partner and how the resource for which they are funded is used to best effect.

5.3 Contracting arrangements

The majority of services are provided under contract by KIDS. They were awarded a 2½ year contract starting in October 2011, until March 2014. The intention is to re-tender from this date on the basis of a three-year contract.

5.4 Referral and assessment mechanisms

The common assessment (or 'CAF') is a voluntary process that aims to support children and young people who require additional help in order to do the best they can. The assessment helps to form a picture of the child/young person's life so practitioners can understand the issues better.

In the case of young carers, the assessment will identify the young carer's strengths and needs and then come up with a plan of action to help support these. If the assessment indicates the needs identified require the support of more than one agency then the young carer's parents can agree that the assessment be discussed at the Early Intervention Hub by a number of agencies. At the Hub practitioners look at the needs and strengths and make a preliminary decision about which agencies can best support the young carer and their family based on the issues in the CAF.

A challenge in working with other partners is aligning referral and assessment processes to make these useful to all parties, but as straightforward as possible.

5.5 Expected key performance outcomes

At the start of the current contract for service provision in 2011, an exercise was undertaken to determine appropriate key performance outcomes to be achieved. These are:

- Short-term (in 1-2 years)
 1. Increased levels of referrals.
 2. More effective partnership working.
 3. Improved access to information and specialist or universal services.
 4. Most Young Carers are involved in health-related initiatives.
 5. Earlier intervention with young carers.

- Medium-term (in 2-3 years)
 1. Improved attendance at school.
 2. Young Carers show increased level of self confidence/ less stress/ better social interaction.
 3. Reduced number of vulnerable young carers.
 4. Reduced crisis intervention.
 5. Better attendance at better events.

- Long-term (in 3 years)
 1. Improved educational attainment of Young Carers.
 2. Happier, more fulfilled young people (and by extension family benefit).
 3. Better progression route after being Young Carers.
 4. Young Carers are healthier.

These outcomes are in addition to the achievement of the contract specification.

5.6 Key messages on effectiveness of current provision and services

○ Strengths and outcomes

Those young carers known to KIDS have the opportunity to benefit from some high quality activities, and attendance at regular club sessions.

The recently established Management Committee should improve partnership working and ensure more agencies understand and deliver on their obligations to support young carers.

○ Challenges; gaps

The degree of caring and whether or not this is significant to the young carer will be one factor in explaining the difference between estimates of the total number of young carers and those known to the Council and support agencies.

A challenge is achieving an appropriate balance in working with partners to build capacity, identify young carers and supporting young carers to access mainstream services compared with providing specific activities and services to young carers.

Greater recognition of issues in schools is needed. The current service provider's awareness of young carers in schools is only partial as they are not in contact with all

schools and, due to contractual requirements and funding, are unlikely to be able to achieve this.

Referral and assessment processes need to be reviewed so that they are recognised and used by both children's and adults' services, and to ensure that the Council can deliver on the expected statutory requirements.

The need for a greater common understanding and more joined up working between partners in adults' children's, health and education sectors.

What is available

6. Finances available

In 2013/14 there is a budget of £53,810 to support work with young carers. In 2013/14 additional funding from health sources of £27,000 is available. It is not known if similar funding will be available in future years.

The contract for services provided by KIDS has a value of £50,000 per annum.

Way forward; Desired future priorities

7. Strategic direction

- Further identification of, and contact with, more young carers, reaching out to all communities (geographic, social and equality-based).
- Promote with young people and families the concept of young carers
- Ensure that the needs of young carers (and all dependent children in the family) are recognised. This means taking account of their hopes, aspirations, strengths and achievements and the need for advice and support for all the family.
- Ensure that young carers are helped to achieve their potential; and, to have the same access to education, career choices and broader opportunities as their peers.
- Ensure young carers and their families are aware of and supported to access mainstream services / support as available to all young people, within their own communities, and that information is appropriate and accessible.
- Only where appropriate, develop further specific, time-limited, targeted support for young carers and their families.
- Greater awareness of young carers' needs in schools and encouraging schools to identify a named lead for this work.
- Closer working with GP practices and other health services
- All agencies to work together to ensure that there are no "wrong doors" and that young carers are identified earlier, assessed and their families are supported in ways that prevent inappropriate caring and support parenting roles regardless of which service is contacted first.

- Ensure assessments take into account the additional needs identified for young carers alongside the person they care for and those of the whole family so that a “rounded package of support for the whole family” can be provided. Whole family pathway approach to young carers and their families may be appropriate.
- Work to ensure risks to independence, safety and welfare are responded to with a ‘whole family approach’.
- Co-ordinate and develop the network of support and information to young carers and their families, ensuring that support is accessible and services are joined up and coherent.
- Raise awareness and provide information to professionals / practitioners about young carers’ needs, and services and support available.
- Support young carers to have a positive experience of care and support.
- Reduce the numbers of young people and children undertaking inappropriate and harmful caring roles, by reducing the incidence of care packages for parents or siblings with unsupported care requirements.
- Ensure transitions from youth to adulthood and from young carer to carer is supported.
- Ensure monitoring, evaluation and assessment of outcomes, and involve young carers in this process.
- Ensure there is better recognition, and greater participation, of young carers and their families in shaping services and in the development and delivery of responses that promote greater choice and control and prevent further inappropriate caring.
- Develop work of the Young Carers Management Committee, for example in its focus on whole family working, information sharing and engaging with the Local Safeguarding Children and Adults Boards to strengthen joined up working and consider workforce development needs to do this safely and effectively;

The priorities that are to be addressed through contracted provision are shown in Annex 3.

The Action Plan is attached as Annex 4.

Graham Symonds
November 2013

Young carers strategy 2013.doc

Case studies

Example 1

The project is supporting an 11 year old girl who was providing care for her mother and support for her sibling with mild ADHD. Whilst she was able to attend school, she also took responsibility for housework, cooking and shopping. In addition, she cared for her mother when she had attacks of arthritis. This restricted the time she could spend outside of the home, socialising with friends.

The project has supported the family through the provision of short breaks for the sibling, and by taking both young people away on a "Holiday of a Lifetime 2013". The project ensured that the parent was supported emotionally and that both young people knew where to go to for help and advice.

Example 2

J is 15 years old, has a younger brother who is 8 years old and registered blind, a father with mental health issues and a chaotic home life. She has 2 other siblings (10 & 13) and between them they undertake the majority of care for their father. Since attending the project, the family have received support at home and school, the young people attend the club and are able to access support and guidance offered whenever they need it.

Through the project, J has had the opportunity to go ice skating, and gained an understanding of her own needs and how to manage them as well as her caring role.



TERMS OF REFERENCE

Name of Group	Young Carers Management Committee
Status of Group	This group has been established as a sub group of the Youth Board, which in turn reports as required on progress to the CYP Partnership Board
Lead Manager	Graham Symonds, Commissioning, Services to Schools and Youth Services Lead
Membership of Group	Graham Symonds, Commissioning, Services to Schools and Youth Services Lead, Bracknell Forest Council Jenny Plumb / Bridget Bevis, KIDS Darren Berry, Youth Engagement Bracknell Forest Youth Service Liz Hassock, Interim Business Manager, Bracknell Forest Youth Service Gill Keeling, Children Social Care, Bracknell Forest Council Alysoun Assante, Adult Social Care, Bracknell Forest Council Andy Kimber, Bracknell and Ascot CCG Debbie Greatrex, CAF Co-ordinator, Bracknell Forest Council Julie Gillis, FSA, Garth Hill College, Representative of schools' work and involvement Young carers – up to 3
Aim / Purpose of Group	To inform, advise and guide work related to the provision of services to young carers in the Bracknell Forest area.
Objectives of group.	<ol style="list-style-type: none"> 1. Support the identification of young carers in the Bracknell Forest area 2. Taking account of the views of young carers, be aware of their circumstances, needs and aspirations 3. Support the development of services in response to the needs and aspirations of young carers 4. Promote the use of whole family assessments and pathways, and the joined up involvement of children's, adult and health services 5. Maintain and monitor an Action Plan 6. Support the transition for individuals from childhood to adulthood and between being a "young carer" and an "adult carer" 7. Raise awareness of, and promote, the services offered to young carers and professionals. 8. Ensure links are made to children's and adults' safeguarding work. 9. Develop, monitor and review a Strategy for Young Carers. 10. Keep abreast of national developments and, as appropriate, evidence and address local impact
Relationship of this group to other groups / meetings	The Committee will: <ul style="list-style-type: none"> • inform work of the Youth Board • link with the Local Safeguarding Children Board (LSCB) and the Safeguarding Adults Partnership Board. • link with the management committees of other youth projects and services

Decision Making Powers	The Committee will agree resourcing priorities that may have a bearing on the work of any of the partners providing services. Recommendations will be made to the Youth Board on strategic matters.
Resources	Where required, for meeting room and refreshment costs
Frequency of Meetings	Three meetings a year around the time of school half terms.
Admin arrangements.	To be provided by the Youth Service.
Date ToR agreed	June 2013
Date to be reviewed.	June 2014

Contracted service for Young Carers - Expected service outcomes

The Council will expect the following outcomes as a minimum to be delivered by the Service Provider:

Direct delivery

1. Promote recognition of caring/young carers, with young people and families, schools and with partners and professionals, including. Health.
2. Identification and recording of young carers.
3. Undertake assessment and referral processes, working with other agencies.
4. Understanding network of support and services available – information collection and evaluation.
5. Where gaps exist, provide specific, time-limited support.
6. Support young carers at appropriate level, including having access to education, activities and careers, to benefit YC's health & well-being and to have a positive experience of care.

Process

7. Involve YC in planning and review of support and services.
8. Monitor and evaluate provision, and attend contract meetings.
9. Show innovative practice and share good practice.
10. Have sound recruitment and training.
11. Have sound safeguarding / health and safety.
12. Source and maintain buildings, equipment and transport.
13. Have sound information sharing procedures and agree to the Council's approach.
14. Monitor on the following equality protected characteristics:
 - Disability
 - Race
 - Gender
 - Sexual orientation
 - Age
 - Religion and belief

Action plan

<i>Actions</i>	<i>Owner (Responsibility), and others contributing</i>	<i>Resource Requirement</i>	<i>Timeframes</i>	<i>Measure of success (How we will know when achieved)</i>
1. Identify and contact young carers, reaching out to all communities (geographic, social and equality-based)	Contracted partner Schools GPs Other referral agencies	Within existing budgets	March 2015, then ongoing	Monitoring of referral agencies Increased levels of referrals Evidence of working together more effectively Monitoring of those from different communities who care for others
2. Closer working with health services	CCG GPs Adult Social Care, Housing and Health	Within existing budgets	March 2015	GPs more aware and know where to refer to Involvement of YC in health related initiatives
3. Greater awareness in schools	Contracted partner Schools	Within existing budgets	March 2015	Nomination of a senior member of staff to take lead responsibility Evidence that YCs needs and situations are being responded to appropriately
4. Improve assessments by development of whole family approach to young carers and their families.	CAF and Early Intervention Co-ordinator Adult Social care Contracted partner All referring agencies	Within existing budgets	March 2015	Reduction in crisis intervention or concerns from agencies involved with the family. Reduction of inappropriate caring Outcomes of process the same whichever agency receives/refers ('no wrong door') Engagement of 'hard-to-engage' families. More joined up and coherent services. Ensure child, parent and family strengths are recognised. Impact on families, from case reviews and comments
5. Ensure all agencies work together to identify and take account of the needs of young carers when undertaking assessments.	Contracted partner Adult Social Care	Within existing budgets	Ongoing	Evidence of young carers' needs in assessments

Restricted

6. Ensure that young carers are helped to achieve their potential; and, to have the same access to education, career choices and broader opportunities as their peers	Contracted partner Schools	Within existing budgets	Ongoing	Improved educational attainment of YC Improved attendance of YC at school Reduced number of YC becoming 'not in education, employment or training' (NEET) Impact of activities and services on young carers, from case reviews and comments YC reporting increased levels of self-confidence, choice and control.
7. Provide information to young carers and their families about the full range of services and support available to them.	Contracted partner	Within existing budgets	Ongoing	Improved access to, and take up of, information and specialist or universal services Support recognised as being accessible Young Carers show increased level of self confidence/ less stress/ better social interaction
8. Enhanced support to YC for the transition from childhood to adulthood and between being a "young carer" and an "adult carer"	Contracted partner Adult Social Care	Within existing budgets	Ongoing	YC report being supported through transition Adult Social Care engage effectively with young carers of this age/stage
9. Provide information to a range of professionals / practitioners about young carers' and their needs, and services and support available	Contracted partner All agencies	Within existing budgets	December 2015	Increased awareness across partner organisations and shared responsibility. Improved co-ordination between agencies. Evidence of information / discussion at professional / practitioner team meetings.
10. Ongoing engagement and participation of young carers in service development, evaluation, processes and decisions that effect them	Contracted partner Referring agencies Schools	Within existing budgets	Ongoing	YC involved in operational and contract review meetings. YC involved in Management Committee Individual needs being met through timely responses to referrals YC report they have greater choice and control of support
11. Develop work of Young Carers Management Committee	Commissioning Lead, CYPL	Within existing budgets	September 2014	Meetings held to agreed frequency Substantial issues addressed Good attendance by all partners